

# ● PRINTER RUSH ●

(PTO ASSISTANCE)

Application : 10652626 Examiner : LE GAU : 3751

From : NPB Location : (IDC) FMF FDC Date: 03/16/06

Tracking #: epm 10652626 Week Date: 02/27/06

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449	_____	<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS	_____	<input type="checkbox"/> Foreign Priority
<input type="checkbox"/> CLM	_____	<input type="checkbox"/> Document Legibility
<input checked="" type="checkbox"/> IIFW	<u>02/24/06</u>	<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW	_____	<input type="checkbox"/> Other
<input type="checkbox"/> DRW	_____	
<input type="checkbox"/> OATH	_____	
<input type="checkbox"/> 312	_____	
<input type="checkbox"/> SPEC	_____	

**[RUSH] MESSAGE:**

Renumbered claim 1 is missing from index of claims.  
please advise/renumber claims in the index.  
(original claim 9 is listed in claim pages and NOA, but not  
shown as allowed in the index of claim).


**[XRUSH] RESPONSE:**

Original claim 9 should have been  
renumbered to 1. Corrected.

INITIALS: dsf

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.

REV 10/04

<b>Issue Classification</b> 	Application/Control No.	Applicant(s)/Patent under Reexamination	
	10/652,626	SUNDBERG, BRIAN	
	Examiner	Art Unit	
	Huyen Le	3751	

ISSUE CLASSIFICATION									
ORIGINAL				CROSS REFERENCE(S)					
CLASS		SUBCLASS		CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)				
4		572.1		297	51	256.12	256.13	256.15	DIG 11
INTERNATIONAL CLASSIFICATION				5	102	103			
A	4	7	K	3/024					
				/					
				/					
				/					
				/					

<i>Huyen Le</i> Huyen Le 2/17/06 (Assistant Examiner) (Date)		<i>Justin R. Yu</i> JUSTINE R. YU 2/17/06 SUPERVISORY PATENT EXAMINER TECHNOLOGY CENTER 3700 (P Primary Examiner) (Date)		Total Claims Allowed: 41  O.G. Print Claim(s) 1 O.G. Print Fig. 5	
<i>Nicole P. Lutz</i> 2-22-06 (Legal Instruments Examiner) (Date)					

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant				<input type="checkbox"/> CPA				<input type="checkbox"/> T.D.				<input type="checkbox"/> R.1.47			
Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original	Final	Original
	1	26	31		61		91		121		151		181		
2	2	14	32		62		92		122		152		182		
3	3	27	33		63		93		123		153		183		
4	4	28	34		64		94		124		154		184		
	5	29	35		65		95		125		155		185		
	6	30	36		66		96		126		156		186		
	7	31	37		67		97		127		157		187		
5	8	32	38		68		98		128		158		188		
6	9	33	39		69		99		129		159		189		
7	10	34	40		70		100		130		160		190		
8	11	35	41		71		101		131		161		191		
9	12	36	42		72		102		132		162		192		
10	13	37	43		73		103		133		163		193		
11	14	38	44		74		104		134		164		194		
12	15	39	45		75		105		135		165		195		
13	16	40	46		76		106		136		166		196		
14	17	41	47		77		107		137		167		197		
15	18		48		78		108		138		168		198		
16	19		49		79		109		139		169		199		
17	20		50		80		110		140		170		200		
18	21		51		81		111		141		171		201		
19	22		52		82		112		142		172		202		
20	23		53		83		113		143		173		203		
21	24		54		84		114		144		174		204		
22	25		55		85		115		145		175		205		
23	26		56		86		116		146		176		206		
24	27		57		87		117		147		177		207		
25	28		58		88		118		148		178		208		
	29		59		89		119		149		179		209		
	30		60		90		120		150		180		210		